

County: Brown
 MANORCARE HEALTH SERVICES - EAST
 600 SOUTH WEBSTER AVENUE
 GREEN BAY 54301 Phone: (920) 432-3213

Facility ID: 1090

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Operated from 1/1 To 12/31 Days of Operation: 365
 Operate in Conjunction with Hospital? No
 Number of Beds Set Up and Staffed (12/31/01): 79
 Total Licensed Bed Capacity (12/31/01): 79
 Number of Residents on 12/31/01: 62

Ownership:
 Highest Level License:
 Operate in Conjunction with CBRF? No
 Title 18 (Medicare) Certified? Yes
 Title 19 (Medicaid) Certified? Yes
 Average Daily Census: 66

Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/01)				Length of Stay (12/31/01)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		35.5
Supp. Home Care-Personal Care	No					1 - 4 Years		51.6
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	6.5	More Than 4 Years		12.9
Day Services	No	Mental Illness (Org./Psy)	4.8	65 - 74	17.7			-----
Respite Care	Yes	Mental Illness (Other)	1.6	75 - 84	29.0			100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	35.5	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	11.3	Full-Time Equivalent		
Congregate Meals	No	Cancer	6.5		-----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	11.3		100.0	(12/31/01)		
Other Meals	No	Cardiovascular	9.7	65 & Over	93.5	-----		
Transportation	No	Cerebrovascular	16.1		-----	RNs		10.9
Referral Service	No	Diabetes	12.9	Sex	%	LPNs		10.2
Other Services	Yes	Respiratory	12.9		-----	Nursing Assistants,		
Provide Day Programming for Mentally Ill	No	Other Medical Conditions	24.2	Male	35.5	Aides, & Orderlies		
Provide Day Programming for Developmentally Disabled	Yes		100.0	Female	64.5			37.0
					-----			100.0

Method of Reimbursement

	Medi care (Title 18)			Medi caid (Title 19)			Other		Private Pay			Family Care		Managed Care						
Level of Care	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	Total Resi- dents	% Of All
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Skilled Care	14	100.0	297	29	90.6	86	1	100.0	123	14	100.0	146	0	0.0	0	1	100.0	325	59	95.2
Intermediate	---	---	---	3	9.4	72	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	3	4.8
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	14	100.0		32	100.0		1	100.0		14	100.0		0	0.0		1	100.0		62	100.0

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/01				
				% Needing Assistance of One Or Two Staff	% Totally Dependent	Total Number of Residents
Percent Admissions from		Activities of	%			
Private Home/No Home Health	2.3	Daily Living (ADL)	Independent			
Private Home/With Home Health	0.9	Bathing	16.1	61.3	22.6	62
Other Nursing Homes	0.9	Dressing	16.1	61.3	22.6	62
Acute Care Hospitals	95.0	Transferring	16.1	53.2	30.6	62
Psych. Hosp. -MR/DD Facilities	0.0	Toilet Use	16.1	53.2	30.6	62
Rehabilitation Hospitals	0.0	Eating	54.8	33.9	11.3	62
Other Locations	0.9	*****				
Total Number of Admissions	221	Continence	%	Special Treatments		%
Percent Discharges To:		Indwelling Or External Catheter	9.7	Receiving Respiratory Care		12.9
Private Home/No Home Health	37.8	Occ/Freq. Incontinent of Bladder	24.2	Receiving Tracheostomy Care		0.0
Private Home/With Home Health	12.0	Occ/Freq. Incontinent of Bowel	11.3	Receiving Suctioning		0.0
Other Nursing Homes	9.0			Receiving Ostomy Care		3.2
Acute Care Hospitals	17.6	Mobility		Receiving Tube Feeding		4.8
Psych. Hosp. -MR/DD Facilities	0.0	Physically Restrained	0.0	Receiving Mechanically Altered Diets		19.4
Rehabilitation Hospitals	0.0					
Other Locations	8.2	Skin Care		Other Resident Characteristics		
Deaths	15.5	With Pressure Sores	11.3	Have Advance Directives		98.4
Total Number of Discharges		With Rashes	6.5	Medications		
(Including Deaths)	233			Receiving Psychoactive Drugs		59.7

Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities

	This Facility %	Ownership: Proprietary Peer Group Ratio	Bed Size: 50-99 Peer Group Ratio	Licensure: Skilled Peer Group Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	83.5	82.7 1.01	85.1 0.98	84.3 0.99	84.6	0.99
Current Residents from In-County	90.3	82.1 1.10	80.0 1.13	82.7 1.09	77.0	1.17
Admissions from In-County, Still Residing	7.7	18.6 0.41	20.9 0.37	21.6 0.36	20.8	0.37
Admissions/Average Daily Census	334.8	178.7 1.87	144.6 2.32	137.9 2.43	128.9	2.60
Discharges/Average Daily Census	353.0	179.9 1.96	144.8 2.44	139.0 2.54	130.0	2.71
Discharges To Private Residence/Average Daily Census	175.8	76.7 2.29	60.4 2.91	55.2 3.19	52.8	3.33
Residents Receiving Skilled Care	95.2	93.6 1.02	90.5 1.05	91.8 1.04	85.3	1.12
Residents Aged 65 and Older	93.5	93.4 1.00	94.7 0.99	92.5 1.01	87.5	1.07
Title 19 (Medicaid) Funded Residents	51.6	63.4 0.81	58.0 0.89	64.3 0.80	68.7	0.75
Private Pay Funded Residents	22.6	23.0 0.98	32.0 0.70	25.6 0.88	22.0	1.03
Developmentally Disabled Residents	0.0	0.7 0.00	0.9 0.00	1.2 0.00	7.6	0.00
Mentally Ill Residents	6.5	30.1 0.21	33.8 0.19	37.4 0.17	33.8	0.19
General Medical Service Residents	24.2	23.3 1.04	18.3 1.32	21.2 1.14	19.4	1.25
Impaired ADL (Mean)	50.3	48.6 1.04	48.1 1.05	49.6 1.01	49.3	1.02
Psychological Problems	59.7	50.3 1.19	51.0 1.17	54.1 1.10	51.9	1.15
Nursing Care Required (Mean)	7.3	6.2 1.17	6.0 1.20	6.5 1.11	7.3	0.99